

**MULTIPLE DEPENDENT
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-376)**

APPLICANT(S)

09/64/489

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	INO.	DEP.	INO.	DEP.	INO.	DEP.
1	/					
2		/				
3		/				
4		/				
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49						
50						
TOTAL INO.	3					
TOTAL DEP.	7.5					
TOTAL	28					

	INO.	DEP.	INO.	DEP.	INO.	DEP.
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TOTAL DEP.						
TOTAL						